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ABSTRACT

Discussing major policy, management, and program issues facing Congress and the Clinton administration in the area of health and human services, this pamphlet provides recommendations for the Department of Health and Human Services (HHS) regarding the social security system, the welfare system, preventing child abuse, and safeguarding the nation's food supply. Following an overview of important issues facing the nation, the second section suggests steps to bolster public confidence in the social security system, including building the system's trust fund by increasing contribution levels and modernizing computer systems. The next section provides recommendations for continuing the welfare reform movement and the implementation of the Family Support Act, such as developing automated data systems to effectively manage caseloads, setting goal-oriented program performance standards, and identifying and sharing effective initiatives between states. The fourth section suggests that HHS provide states with greater flexibility in using government funds to prevent child abuse through early intervention and that a national foster care system be developed to provide outcome-oriented data on child welfare services. The final section proposes that an agency-wide system for tracking regulation development be implemented in the Food and Drug Administration to improve agency effectiveness and better allocate existing resources. Includes references for 22 related GAO products. (BCY)

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December 1992

Health and Human Services Issues

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GAO **United States**
General Accounting Office
Washington, D.C. 20548

Comptroller General
of the United States

December 1992

The Speaker of the House of Representatives
The Majority Leader of the Senate

In response to your request, this transition series report discusses major policy, management, and program issues facing the Congress and the new administration in the areas of health and human services. The issues include (1) strengthening the social security system, (2) reforming the nation's welfare system, (3) keeping families intact and protecting children from abuse and neglect, and (4) adequately safeguarding the nation's food and drug supply.

Another report in this transition series, Health Care Reform (GAO/OCG-93-8TR, Dec. 1992), discusses shaping an effective approach to national health care reform. Also, as part of our high-risk series on program areas vulnerable to fraud, waste, abuse, and mismanagement, we are issuing a related report, Medicare Claims (GAO/HR-93-6, Dec. 1992).

The GAO products upon which this transition series report is based are listed at the end of this report.

We are also sending copies of this report to the President-elect, the Republican leadership of the Congress, the appropriate congressional committees, and the Secretary-designate of Health and Human Services.

Charles A. Bowsher

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Health and Human Services Issues

The Department of Health and Human Services (HHS) oversees hundreds of federal programs that are vital to the health and welfare of virtually every American. Its programs help ensure adequate health care; provide income security for the aged, poor, and disabled; help the disadvantaged become productive citizens; protect children and other vulnerable populations; and safeguard the nation's food and drug supply. HHS's fiscal year 1992 budget was about $550 billion, or nearly 37 percent of the federal government's total budget. About 86 percent of these funds were for social security, Medicare, and Medicaid.

The new administration and the 103rd Congress will have to deal with several significant social policy issues. We discussed some of these issues in our 1988 transition series report; others appear for the first time in this report. Among the more important issues demanding attention are the following.

- Health care is one of the greatest current domestic challenges. Issues include ensuring adequate access to health care; controlling health care costs; and curbing Medicare funds lost through fraud, waste, and abuse. Because of the importance of these issues,

we discuss them in a separate transition series report on health care reform and in a high-risk series report on Medicare.

- Second, public confidence in social security programs has eroded and must be restored. To bolster the public's confidence, the trust funds need to continue growing to a level sufficient to withstand economic downturns. In addition, workers need to know what their benefits will be and have assurance that those benefits will be there when they need them. Social security services must be delivered more efficiently and effectively, particularly in view of the unprecedented number of "baby boomers" whose retirement will impose a great demand on the system. Service for the disabled has already deteriorated to the point that claimants must wait up to 4 months for a disability decision, and the situation is worsening. Also, the disability program is rapidly running out of money and may need major reforms.

- Third, without closer attention to states' implementation efforts, the major welfare reform effort of the late 1980s may fail. Legislation enacted then was designed to help dependent families achieve self-sufficiency through work. Its implementation, however, has been slowed

by skyrocketing caseloads and state budget constraints. The new administration and the Congress will need to ensure that fledgling programs associated with welfare reform are properly implemented. As states' welfare reform efforts are evaluated and their outcomes and impacts analyzed, changes based on successful experiments should be instituted to reshape the program.

- Finally, child welfare programs, designed for a different era, need to be changed. More children live in poverty—one in five—than ever before, reported cases of child abuse and neglect are at record levels, and the foster care system is struggling to accommodate increasing caseloads. The new administration and the Congress need to focus on prevention and early intervention programs to help keep families intact. Also, an active federal strategy for collecting data, disseminating information about best practices, and evaluating child welfare programs is needed. Local governments need this information to support their efforts to provide the most appropriate services at the right time and in the right place.

These and other issues will demand strong leadership from the Congress and HHS. With resources limited, HHS and state and local

governments will need to work smarter and work together to effectively manage and operate health and human services programs.

Bolstering the Public's Confidence in Social Security and Ensuring High-Quality Services

Sooner or later in their lives, nearly all citizens will be touched by the social security system. For most aged and disabled Americans, social security is a key source of income support. In 1991, about $263 billion in social security benefits was paid to more than 40 million beneficiaries. In recent years, however, the public's confidence in the social security system has eroded. Many are concerned that monies will not be there to pay their benefits in the future.

To help build the public's confidence in the social security system, the Social Security Administration (SSA) should take steps to ensure an adequate contingency reserve and provide workers with a tangible sense of what their benefits will be. In addition, to ensure high-quality services, SSA must modernize its computer systems and strategically manage its resources. SSA's computer modernization could cost billions of dollars over the next 10 years. SSA also needs to expand its research information about the disability and supplemental security income programs in order to strengthen program evaluation and management and enable it to consider alternative program designs.

Gaining the Public's Confidence

After SSA's well-publicized financial difficulties in the early 1980s, many people believe that social security funds will not be sufficient to pay their benefits when they retire. In recent years, actions have been taken to build the public's confidence in the social security system. These actions include changing the methods of financing the trust fund, requiring that annual statements of personal earnings and benefits be provided to individuals, and making financial management improvements, such as preparing annual audited financial statements of SSA.

To further build public confidence, the social security trust fund needs to grow to a level sufficient to withstand economic downturns. Current financing plans for the social security trust fund, which envision accumulating a $5.5 trillion reserve by 2025, set contribution rates higher than necessary to pay current benefits. This plan has been controversial. Some believe that if the reserves add to national savings or are used for government activities that enhance future economic growth, the burden of financing future retirement costs can be reduced. Others, however, doubt that the reserves will be used for these purposes and believe that the system should be financed

on a pay-as-you-go basis, in which annual revenues closely match annual benefit payments and the trust funds provide protection against economic downturns.[1] If a decision is made to return to a pay-as-you-go system, we believe that the trust funds should be maintained at a level adequate to pay benefits for 1 to 1-1/2 years. This level would be sufficient to offset the reduction in tax revenues that accompanies economic downturns, thus assuring the public that the system is sound.

In 1990, the Congress mandated that SSA provide an annual statement of personal earnings and benefits to individuals on request. Beginning in 1995, SSA will have to provide statements to all individuals aged 60 and over and, by October 1999, annually to all workers covered under social security. This latter requirement will add very substantially to SSA's work load. It is important that SSA meet this challenge in order to enhance the public's confidence in the social security system. These statements will provide workers with a tangible sense of the benefits they will receive in the future. Given other anticipated work load increases discussed below, SSA needs to develop and

[1]Our transition series report Budget Issues (GAO/OCG-93-1TR, Dec. 1992) discusses the relationship between the social security trust fund surplus and the federal deficit.

implement a workable strategy for sending these statements to all workers.

Ensuring High-Quality Services

Another factor that will dramatically increase SSA's work load is the impending baby-boom generation retirement. SSA is also experiencing significant increases in disability cases, and major delays in processing already exist. At the same time, given the budgetary constraints faced by all federal agencies, funding for program administration will be limited, placing greater pressure on SSA's management to provide high-quality public service at minimum cost. To meet this challenge, SSA must (1) gain a greater understanding of the public's expectations, (2) logically sequence its implementation of critical agency plans, (3) reengineer its work processes to enhance service delivery, (4) identify and train the staff it needs to provide high-quality services, and (5) enhance its research information to better understand current trends and consider alternative program designs.

Understanding the Public's Expectations

Since 1989, SSA has made progress in using strategic management to set agencywide goals, establish priorities, guide budget

decisions, and measure performance. However, in developing its service objectives and priorities, SSA ignored a fundamental tenet of effective planning: that meeting the public's expectations—not internal needs—is the measure of service quality. SSA proceeded without involving the public, interest groups, or congressional committees, leaving the agency without assurance that its objectives and priorities corresponded with the public's expectations. As a result, SSA may spend its scarce resources on service objectives that it thinks are important but the public does not.

Sequencing Implementation of Agency Plans

SSA's strategic management also does not provide a framework for the completion or correct sequencing of critical agencywide plans—such as plans for operations service delivery, human resources, facilities, and information systems. Correct sequencing is necessary to ensure that plans for new computer systems and facilities, for example, are based on an operations service delivery plan that sets forth how SSA will conduct business in the future.

Reengineering Work Processes

To economically and efficiently meet its future service demands, SSA will need to

modernize its information systems. If these systems are not enhanced, SSA believes it will need about 17,000 additional staff. SSA has taken a number of steps essential to developing automated information systems. However, much remains to be done to fully justify SSA's systems modernization plans, which could cost from $5 billion to $10 billion over the next 10 years. Specifically, SSA has not completed its operations service delivery plan on how it will conduct work in the future, including the identification of alternative work processes. In addition, SSA has not fully justified the costs and benefits of proposed systems enhancements. Until it takes these actions, SSA could be acquiring new technologies to automate old processes, rather than developing new, cost-effective information systems based on more efficient work processes.

Training Staff to Deliver Quality Services

SSA has taken a number of steps to improve its work force. However, it does not have a human resource plan identifying the type and number of personnel needed to accomplish its service objectives given the anticipated work-load increase and use of automation. SSA needs a well-trained work force and a positive work environment to

effectively prepare for and handle its future challenges. But, management has not placed priority on training newly promoted supervisors and managers for leadership positions. Also, SSA may not be devoting sufficient training funds to certain operational areas. For example, field office employees say they lack the training needed to apply agency policy and use computer systems fully. SSA will be challenged to develop these critically important training programs in an environment of general budget constraints, including reductions in its training budget. A human resource plan covering long- and short-term initiatives for training, improvements to the work environment, and planning for management succession could ensure the coordination and continuity of initiatives and the achievement of desired improvements.

Developing Research Information on Disabilities

Since 1984, caseloads and costs have risen rapidly in SSA's Disability Insurance and Supplemental Security Income programs. The agency is having trouble (1) processing disability claims in a timely manner and (2) performing legally required reviews of the beneficiary rolls to ensure that beneficiaries continue to be eligible. Furthermore, SSA lacks adequate research information to

understand current trends and consider alternative designs for these programs. In addition, the Americans with Disabilities Act places a much greater emphasis on enabling disabled persons to work than SSA's current programs do. To succeed in meeting the act's challenge, the agency will need a focused research program to direct its rehabilitation efforts.

Improving SSA's Operations

In these times of tight budgets, the Congress has been looking for opportunities to restrain the growth in federal agencies' administrative costs. Thus, SSA should not expect any increase in funding and should take steps to operate more efficiently with the resources it has. The actions it takes should contribute both to improving the quality of its services and reducing future administrative costs. To move in this direction, SSA needs to

- implement comprehensive strategic management that involves the public and the Congress in establishing the agency's priorities and direction, and ensures successful implementation of agencywide initiatives;

- ensure that its plans for modernizing information systems adequately consider their costs and benefits as well as alternative, more efficient work processes;
- develop a human resource plan to guide the hiring and training of the personnel needed to accomplish the agency's long-range objectives and coordinate current work-force initiatives; and
- acquire the information necessary to support program evaluation and consideration of policy alternatives for its disability and supplemental security income programs.

Exercising Stronger Leadership to Achieve Welfare Reform

With the passage of the Family Support Act of 1988 (FSA), the nation adopted a new approach to taking care of its poor. The act reflects a new political consensus on the goal of means-tested, family-focused programs. It emphasizes greater parental responsibility by encouraging work efforts and increased cooperation with child support enforcement, instead of primarily providing cash assistance. In fiscal year 1991, the federal and state governments provided over $20 billion in cash assistance to needy families with children through the Aid to Families with Dependent Children (AFDC) program.

This welfare reform effort, however, has gotten off to a rocky start. While progress has been made, it has been uneven as economic conditions have worsened in many states since FSA's enactment. States have experienced unprecedented growth in AFDC caseloads, high unemployment rates, and increased child support caseloads and Medicaid costs amid revenue shortfalls, creating serious and possibly long-term budget problems.

Implementation of FSA is still in its early stages, and care must be taken to fully establish the programs, develop information

systems, assess performance, and evaluate results. Without stronger leadership, direction, and oversight from HHS, current welfare reform efforts may falter or fail. To help states keep welfare reform on track and increase the number of welfare-dependent families that become self-sufficient, HHS needs to

- intensify its efforts to ensure that states develop the automated data systems needed to provide high-quality and timely services to welfare clients, effectively manage increasing caseloads, and provide the information that management needs to measure progress and set effective policies;
- establish program performance standards based on outcome in addition to process-oriented measures to achieve desired program results; and
- work with states to identify practices that help families achieve self-sufficiency and disseminate information about them.

Intensifying Efforts to Improve Data and Data Systems

Several federal programs essential to helping children and families achieve economic self-sufficiency lack national data and automated data systems. Data collected on a

nationwide basis are needed to evaluate these programs and provide a basis for making policy changes. However, inaccurate and incomplete data are being collected in several programs, including the child support enforcement, Job Opportunities and Basic Skills Training (JOBS), and transitional child care and medical benefits programs. For example, data are lacking to determine the outcomes of the transitional benefit programs that are focused on helping families move from welfare dependency to self-sufficiency. Unless HHS renews its data collection and evaluation efforts, the Congress will have insufficient information with which to judge the effectiveness of these programs.

HHS's Administration for Children and Families (ACF) also needs to work more closely with states to develop automated data systems. These systems could help states provide high-quality services to welfare clients, better manage increasing caseloads, and provide information needed to assess policies. However, ACF's inadequate oversight of and assistance to states have resulted in wasted federal and state moneys. For example, ACF allowed several states to develop severely flawed child support enforcement systems at a cost of millions of

dollars in federal funds before these efforts were redirected. Federal funding for development of state systems expires in 1995, and it is unlikely that all states will have developed effective systems by then. In addition, ACF has not been effectively monitoring states' efforts to develop automated eligibility systems for AFDC and Medicaid programs, allowing millions of dollars to be spent on systems that either do not work or do not meet functional requirements.

Developing Goal-Oriented Program Performance Standards

Process-oriented measures, such as how many people participated or the percentage of cases completed within a given time, are used to assess states' performance and reward them in the JOBS and child support enforcement programs. These measures, however, do not always bring about desired program outcomes like obtaining support for children or helping families achieve self-sufficiency. States need outcome-oriented performance standards to achieve program goals and improve their operations.

The Family Support Act mandates that, by October 1993, the Secretary of HHS submit recommendations for JOBS performance

standards to the Congress. Also, although not legislatively required to do so, HHS is beginning to work with states to develop similar performance standards for the child support enforcement program. To date, however, progress has been slow. ACF needs to move expeditiously to develop outcome-oriented performance standards if it is to meet the October 1993 deadline.

Identifying and Sharing Effective Initiatives

In keeping with the flexibility afforded them, states have been experimenting with different approaches to operating their AFDC, child support enforcement, and JOBS programs. Welfare reform initiatives have proliferated as most states confront economic difficulties. States need a way to share and capitalize on each other's experiences. To further the federal and state partnership inherent in most federally funded human services programs, HHS should play a much more active role in identifying the more effective practices, disseminating information about them, and helping states implement them.

Expanding States' Use of Child Welfare Funds

Among its responsibilities for child welfare services, HHS provides states with funding to ensure the welfare of children that a state determines are at-risk of being removed from their homes. In recent years, reported cases of child abuse and neglect and foster care caseloads and expenditures have grown against a backdrop of state fiscal crises. This foster care growth is expected to continue because of the increased number of very young, drug-exposed children who may stay longer and need more expensive treatment. Some states have tried prevention and early intervention services, such as intensive in-home skill training in parenting and crisis management for at-risk families. These services show promise and could slow caseload growth, but states are finding it increasingly difficult to finance them.

Current legislation provides limited funding for prevention and early intervention efforts. Titles IV-B and XX of the Social Security Act provide modest funding that states can use for these activities; foster care funds available under Title IV-E of the act cannot be used in this way. Providing states with greater flexibility to use Title IV-E funds for prevention and early intervention efforts could encourage them to select the most appropriate child welfare services. ACF and

states should place greater emphasis on prevention and early intervention activities in an attempt to keep families intact and hold down future federal and state child welfare costs.

HHS should also move aggressively to issue regulations establishing a national foster care information system to provide outcome-oriented data on child welfare services in general and on foster care in particular, so that informed decisions can be made about the most appropriate care for individual children. Such a system was legislatively mandated in 1986 and was to be completed by October 1991. However, as a result of HHS's delays in issuing final regulations, little progress has been made in developing the system.

Other actions that HHS could take to help reduce the growing number of children in foster care and keep families intact include

- establishing outcome-oriented performance standards for the child welfare program to help identify what does and does not work and encourage states to adopt more effective practices, and

- serving as a clearinghouse on better practices for states to use in operating their programs, including disseminating information on effective caseworker and foster parent recruitment, training, and retention and on adoption outreach.

Allocating FDA's Resources Efficiently and Establishing a Regulation Tracking System

The Food and Drug Administration undertakes a wide range of responsibilities—such as protecting the nation against impure and unsafe foods, drugs, cosmetics, and medical devices—with a modest amount of resources. From 1980 through 1989, FDA's staff decreased by 587, or almost 8 percent, while the Congress enacted 13 new laws expanding the agency's responsibilities. FDA estimates that it will need a budget of $1.4 billion in 1994 to meet its responsibilities—a substantial increase over its $800 million 1993 budget. While recent legislation permitting FDA to collect user fees to support review of new drug applications should provide some relief, no additional funding is available to meet other responsibilities, such as medical device regulation despite a growing backlog of applications for approval of new devices.

As part of its increased responsibilities, FDA was required to issue numerous new regulations to implement legislation. We found, however, long delays and a lack of overall direction in the agency's process for developing regulations. FDA agreed in principle with our recommendation that it create an agencywide system for tracking regulation development, but it has not yet

done so. FDA needs to establish this system to efficiently manage its regulatory process.

In the past, FDA has had trouble assessing its needs and assigning priorities to its activities. Recently, however, the agency completed a detailed needs assessment, looking 5 years into the future, that could enable it to allocate its resources efficiently. This assessment describes the resources FDA needs to reach specific goals by 1997. To help FDA fulfill its many responsibilities with existing staff, the Congress should ensure that FDA uses the goals of this needs assessment as the basis for setting priorities agencywide and allocating the resources the Congress provides.

Structural flaws in the federal government's food safety system have been widely reported. Such flaws can affect the public's health and erode consumers' confidence in the federal government's ability to ensure food safety and quality. Many of these flaws can be attributed to the fragmentation of responsibility for food safety and quality among several federal agencies. The recent controversy between the Department of Agriculture and FDA over nutrition labeling for food products illustrates the jurisdictional problems associated with this

fragmentation. The need for a uniform, risk-based inspection system to ensure a safe food supply is discussed in another report in this transition series, Food and Agriculture Issues (GAO/OCG-93-15TR, Dec. 1992).

Related GAO Products

Departmental Issues	Management of HHS: Using the Office of the Secretary to Enhance Departmental Effectiveness (GAO/HRD-90-54, Feb. 9, 1990). Health and Human Services Issues (GAO/OCG-89-10TR, Nov. 1988).
Health Care Financing	Medicare Claims (GAO/HR-93-6, Dec. 1992).
Social Security	Social Security Disability: Growing Funding and Administrative Problems (GAO/T-HRD-92-28, Apr. 27, 1992). ADP Planning: SSA's February 1989 Report on Computer Modernization Is Incomplete (GAO/IMTEC-89-76, Sept. 25, 1989). Social Security: Status and Evaluation of Agency Management Improvement Initiatives (GAO/HRD-89-42, July 24, 1989). GAO's Views on an Independent Social Security Administration and the Personal Earnings and Benefit Statement (GAO/T-HRD-89-23, June 2, 1989). Social Security: The Trust Fund Reserve Accumulation, the Economy, and the Federal Budget (GAO/HRD-89-44, Jan. 19, 1989).

Welfare Reform

Welfare to Work: States Serve Least Job-Ready While Meeting JOBS Participation Rates (GAO/HRD-93-2, Nov. 12, 1992).

Welfare to Work: Implementation and Evaluation of Transitional Benefits Need HHS Action (GAO/HRD-92-118, Sept. 29, 1992).

Child Support Enforcement: Timely Action Needed to Correct System Development Problems (GAO/IMTEC-92-46, Aug. 13, 1992).

Welfare Programs: Ineffective Federal Oversight Permits Costly Automated System Problems (GAO/IMTEC-92-29, May 27, 1992).

Welfare to Work: Effectiveness of Tribal JOBS Program Unknown (GAO/HRD-92-67BR, Mar. 19, 1992).

Interstate Child Support: Wage Withholding Not Fulfilling Expectations (GAO/HRD-92-65BR, Feb. 25, 1992).

Interstate Child Support Enforcement: Computer Network Contract Not Ready to Be Awarded (GAO/IMTEC-92-8, Oct. 23, 1991).

Welfare to Work: States Begin JOBS, but Fiscal and Other Problems May Impede

Their Progress (GAO/HRD-91-106, Sept. 27, 1991).

Child Welfare Services

Child Abuse: Prevention Programs Need Greater Emphasis (GAO/HRD-92-99, Aug. 3, 1992).

Foster Care: Children's Experiences Linked to Various Factors; Better Data Needed (GAO/HRD-91-64, Sept. 11, 1991).

Food and Drug Administration

Food Safety and Quality: Uniform, Risk-Based Inspection System Needed to Ensure Safe Food Supply (GAO/RCED-92-152, June 26, 1992).

FDA Regulations: Sustained Management Attention Needed to Improve Timely Issuance (GAO/HRD-92-35, Feb. 21, 1992).

Food Safety and Quality: FDA Needs Stronger Controls Over the Approval Process for New Animal Drugs (RCED-92-63, Jan. 17, 1992).

FDA Resources: Comprehensive Assessment of Staffing, Facilities, and Equipment Needed (GAO/HRD-89-142, Sept. 15, 1989).

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